

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 175376	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 11/24/2014
NAME OF PROVIDER OR SUPPLIER APOSTOLIC CHRISTIAN HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 511 PARAMOUNT ST SABETHA, KS 66534		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
S 000	INITIAL COMMENTS The following citations represent the findings of an Assisted Living/Residential Healthcare Licensure resurvey.	S 000			
S3092 SS=D	26-41-202 (d) Negotiated Service Agreement Revisions (d) Each administrator or operator shall ensure the review and, if necessary, revision of each negotiated service agreement according to the following requirements:(1) At least once every 365 days; (2) following any significant change in condition, as defined in K.A.R. 26-39-100; (3) at least quarterly, if the resident receives assistance with eating from a paid nutrition assistant; and (4) if requested by the resident or the resident ' s legal representative, facility staff, the case manager, or, if agreed to by the resident or the resident ' s legal representative, the resident ' s family. This Requirement is not met as evidenced by: K.A.R. 26-41-202(d) The facility identified a census of 20. The sample included 3 residents. Based on observation, record review, and interview the facility failed to review the negotiated service agreement at least annually for 3 (#101, #102, #103) of the sampled residents. Findings included: - The physician's order note in resident #101 ' s chart revealed an admission date of 5/3/12.	S3092			

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S3092	<p>Continued From Page 1</p> <p>The negotiated service agreement (NSA) located in the resident's chart dated 5/3/12 revealed staff failed to review the agreement annually.</p> <p>Observation on 11/17/14 at 2:25 P.M. revealed the resident sat in a chair in his/her apartment reading a book.</p> <p>Interview on 11/17/14 at 3:21 P.M. with administrative nursing staff D revealed the facility did not complete NSAs annually.</p> <p>The undated policy provided by the facility regarding NSAs revealed the NSA was to be reviewed by facility staff at least annually, revised if necessary, and revised more frequently if requested by the resident, the resident's legal representative, the family, if agreed to by the resident, the case manager of the facility.</p> <p>The facility failed to review this resident's NSA annually.</p> <p>- The physician's order note in resident #102's chart revealed an admission date of 5/3/12.</p> <p>The negotiated service agreement (NSA) located in the resident's chart dated 5/3/12 revealed staff failed to review the agreement annually.</p> <p>Observation on 11/17/14 at 2:04 P.M. revealed the resident sat in a chair in the dining room intermittently conversing with staff and another resident.</p> <p>Interview on 11/17/14 at 3:21 P.M. with administrative nursing staff D revealed the facility did not complete NSAs annually.</p> <p>The undated policy provided by the facility regarding NSAs revealed the NSA was to be</p>	S3092			

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S3092	Continued From Page 2 reviewed by facility staff at least annually, revised if necessary, and revised more frequently if requested by the resident, the resident's legal representative, the family, if agreed to by the resident, the case manager of the facility. The facility failed to review this resident's NSA annually. - The physician's order note in resident #103's chart revealed an admission date of 7/2/12. The negotiated service agreement (NSA) located in the resident's hard chart signed 7/2/12 revealed staff failed to review the agreement annually. Observation on 11/17/14 at 2:14 P.M. revealed the resident sat in a recliner in his/her apartment watching television. Interview on 11/17/14 at 3:21 P.M. with administrative nursing staff D revealed the facility did not complete NSAs annually. The undated policy provided by the facility regarding NSAs revealed the NSA was to be reviewed by facility staff at least annually, revised if necessary, and revised more frequently if requested by the resident, the resident's legal representative, the family, if agreed to by the resident, the case manager of the facility. The facility failed to review this resident's NSA annually.	S3092			
S3395 SS=E	28-39-255 LAUNDRY (c) Laundry facility. (1) The facility shall store soiled laundry in a	S3395			

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S3395	<p>Continued From Page 3</p> <p>manner which prevents odors and spread of disease.</p> <p>(2) If laundry is processed in the facility, the facility shall provide washing and drying machines. The facility shall arrange the work area to provide a "one-way flow" of laundry from a soiled area to a clean area.</p> <p>(3) The facility shall provide a work counter and a locked cabinet for storage of chemicals and supplies.</p> <p>(4) The facility shall provide a handwashing lavatory with a non-reusable method of hand-drying within or accessible to the laundry facility.</p> <p>This Requirement is not met as evidenced by: K.A.R.28-39-255(c) (3)</p> <p>The facility identified a census of 20 residents. The facility identified 8 residents as cognitively impaired and independently mobile. Based on observation and interview the facility failed to maintain a safe environment.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Observation on 11/17/14 at 9:58 A.M. of the unlocked and open laundry room revealed the following chemicals with warning labels, kept under the sink in an unlocked cabinet: 1 bottle of Ecolab Juniper Splash Odor Conteractant, " Do not drink, keep out of reach of children;" one container of Oxyclean, " Injurious to eyes. Harmful if swallowed. Keep out of reach of children;" 2 bottles of Concentrated Clorox Bleach, " Keep out of reach of children. Danger: Corrosive;" One spray bottle of Clorox Clean-up Cleaner and Bleach, " Keep out of reach of 	S3395			

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S3395	<p>Continued From Page 4</p> <p>children. Eye and skin irritant; " 1 bottle of Ecolab Stain Blaster, " Keep out of reach of children; " and 2 containers of Spurrier 1343 Liquid Laundry Detergent, " Keep out of reach of children. Harmful if swallowed. "</p> <p>Interview on 11/17/14 at 11:05 P.M. with administrative nursing staff D revealed he/she acknowledged chemicals should not be accessible to residents.</p> <p>Interview on 11/18/14 at 2:14 P.M. with administrative nursing staff D revealed the facility did not have a policy regarding accessibility to chemicals.</p> <p>The facility failed to maintain a safe environment for cognitively impaired and independently mobile residents.</p>	S3395			

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